

Project Narrative

State Competitive Supplemental Funding for Behavioral Risk Factor Surveillance System (BRFSS)

CDC-RFA-DP09-90103-SUPP10

Project Overview and Description

The purpose of proposed project is to enhance and expand the surveillance capabilities of the California BRFSS program and to support ongoing state-based public health surveillance infrastructure. The funding will allow the California BRFSS program to do the following: 1) Increase both the cell phone and landline survey sample sizes by conducting more telephone interviews; 2) conduct surveillance on influenza like illness (ILI) for a seven month period from September 2010 through March 2011; and 3) add questions to the 2011 BRFSS survey which address the following topics: adverse childhood experiences (ACE), chronic obstructive pulmonary disease (COPD), inadequate sleep and asthma callback survey.

Component 1: Conduct BRFSS Surveys

1A: ILI Surveillance

A total of 12 questions from the ILI module will be added to the BRFSS questionnaire during the seven month period from September 2010 through March 2011. ILI data will be submitted to CDC's Division of Behavioral Surveillance according to the BRFSS protocol on a bi-weekly basis over the course of the surveillance period. Data collection will be monitored regularly to ensure adherence with data collection protocols as described in the relevant section below. Data will be processed, cleaned and submitted according to established protocols as described in the relevant section below.

IB. Multimode Surveillance

The California BRFSS program proposes to use the present funding to maintain its 2010 landline survey sample size at 2009 levels, which was a total of 14,500 completed interviews. In addition, we are aiming to increase the cell phone sample size from 345 in 2009 to 10% of the total landline sample, or 1,450 interviews. Data collection will be monitored regularly to ensure adherence with data collection protocols as described in the relevant section below. Data will be processed, cleaned and submitted according to established protocols as described in the relevant section below.

IC. Implementation of Optional Modules

The following CDC optional modules will be added to the 2011 California BRFSS questionnaire: adverse childhood experiences (ACE), chronic obstructive pulmonary disease (COPD), inadequate sleep and asthma callback survey. Data collection will be monitored regularly to ensure adherence with data collection protocols as described in the relevant section below. Data will be processed, cleaned and submitted according to established protocols as described in the relevant section below.

Data Collection and Monitoring Procedures

Since 1984, the California Department of Public Health (CDPH) has entered into a yearly cooperative agreement with the CDC to develop and implement the BRFSS in California. For both the landline and cell phone surveys, CDPH will ensure that data are collected with methodological rigor and protocols as set forth in the CDC BRFSS User's Guide and numbered

memorandums. Consistency in data collection procedures, rigorous quality control, interviewer monitoring, and stringent data reviews ensure the validity of the data. Progress will be measured by daily monitoring of interviewers for at least 15 minutes per four-hour shift. Staff will perform both audio and visual monitoring and will receive special training to ensure consistency in the quality and scope of the items being evaluated. Survey Research Group (SRG) staff, who are housed within CDPH have developed a software package that records the call history, imports questions on demand, records behaviors observed by the monitoring staff, scores the monitoring session, and stores all of the information in a database for later analysis and retrieval. Substandard behavior is brought to an interviewer's attention as soon as it occurs; less urgent reviews wait until the end of the shift. All interviewer evaluations include the monitoring scoring average as part of their overall performance rating.

All new interviewers undergo a comprehensive training program before any live calling. All SRG supervisory and interviewing personnel are thoroughly trained using SRG-standardized training manuals and, in addition, are trained on specific projects. SRG interviewers follow standard questionnaire scripts developed specifically for the BRFSS and use the CDC BRFSS Users' Guide protocol for the BRFSS and many other projects. Trainees do not work on the BRFSS. Prior to calling on the BRFSS, an interviewer must be certified as BRFSS-trained and eligible. Experienced interviewers also undergo periodic training. Supplementary monthly training sessions, mandatory for all staff, provide additional reinforcement to an ongoing comprehensive training strategy.

The quality of the data collected will also be monitored on a regular basis by a Research Scientist. The research scientist will examine data files periodically to ensure that the necessary

fields are populated and that skip patterns are appropriately programmed into the software system.

Data Cleaning and Submission Procedures

The Research Scientist on this project will assume responsibility for data cleaning and timely submission of electronic data files to CDC according to protocols detailed in the BRFSS Operational and User's Guide. The Research Scientist will edit and check for discrepancies in the data files using the PC-EDITS software program provided by CDC, which checks the data against the specifications in the item-by-item coding instructions and editing criteria. Individual records in the monthly data files will be corrected as needed, using the EDITFIX software provided by CDC. Once the data file is verified as error free, the data will be submitted electronically to CDC using the BRFSS upload/download site. A cleaned and edited quarterly data file will be provided to CDC on a monthly basis. A cleaned and edited final dataset will be submitted to CDC for each of the two data collection periods within 30 days of the end of the data collection period. The exception to the monthly submission will be for the ILI data, which will be submitted to CDC on a bi-weekly basis. SRG is fortunate to house a Research Scientist with almost 15 years of experience managing the CBRFSS data, who will train the Research Scientist assigned to this project. She is well versed in the PC Edits program and has a close working relationship with many of the staff at CDC.